JUDICIAL CA CAMPAIGN F	FORM JC/OH COVER SHEET PG 1						
The JC/OH Instruction Guide explains how to complete this form.			CCOUNT # Ethics Commission filers) 0019973	2 PAGE # 1 of 3			
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIE Hon. John	RST	MI	OFFICE USE ONLY			
NAME	NICKNAME LA Diet		SUFFIX	Date Received			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE 1900 Steamboat Springs Co Austin, TX 78746						
Change of Address				Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER	MS/MRS/MR FIR Mrs. Mar	RST Y	MI	Date Processed			
NAME	NICKNAME LA. Diet		SÚFFIX	Date Imaged.			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP OF THE STATE; STATE; ZIP OF THE STATE; APT / SUITE #; CITY; STATE; ZIP OF THE STATE; ZIP						
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUI						
8 REPORT TYPE	X January 15 30th day before election		Runoff	Runoff 15th day after campaign treasurer appointment (officeholder only)			
'	July 15 8th	day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)			
9 PERIOD COVERED	Month Day Year 07/01/2008	THROUGH	Month Day 12/31/20	Year			
10 ELECTION	ELECTION DATE	ELECTION TYPE					
	Month Day Year	Primary	Runoff	General Special			
11 OFFICE	OFFICE HELD (if any) District Judge District 250		12 OFFICE SOUGHT (if known	)			
13 NOTICE OF DIRECT CAMPAIGN	Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval.  Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure.						
EXPENDITURE BY OTHER INDIVIDUALS	Name						
	Address/PO Box; Apt. / Suite #; City; State; Zip Code						
additional pages							
		GO TO PAG	E 2				

P.O. Box 12070

Austin, Texas 78711-2070

(512)463-5800

1-800-325-8506

## JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OF

SUPPORT &	TOTALS			Cover	SHEET PG 2
14 C/OH NAME Dietz	, John (Hon.)			15 ACCOUNT # (EI	thics Commission filers)
16 NOTICE FROM	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures				
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
,			•	. <b>-</b> ; ∡j	500 J
	GENERAL	COMMITTEE ADDRESS		\$ C	
	ł				
	SPECIFIC	COMMITTEE CAMPAIGN	TREASURER NAME		<del>-5 13 -</del>
				ZA S	
additional pages			TOTAL UNITED A PROCESS		<del>- 100 - 100</del>
		COMMITTEE CAMPAIGN	TREASURER ADDRESS	AS	5€00MD 9M 3: 43
17 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED				0.00
	TOTAL POLITICAL CONTRIBUTIONS     (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$	0.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED			\$	0.00
	4. TOTAL POLITICAL EXPENDITURES			\$	4,100.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				50,106.17
OUTSTANDING LOAN TOTALS	6. TOTAL F	THE \$	0.00		
18 AFFIDAVIT					
	Notary Publi My Comm	M. ROSEN ic, State of Texas ission Expires ER 17, 2009	I swear, or affirm, under per is true and correct and inclume under Title 15, Election  John K. Dietz  Signature	ides all information required	d to be reported by
AFFIX NOTARY S	STAMP / SEAL ABOV	′E	·.		
Sworn to and subscrib	ed before me, by t	he said <u>John</u>	K. Dietz	, this the	$\frac{1}{5}$ day
of January, 2	es ot , $\underline{ ho_{C}}$ 0.9	rtify which, witness n	ny hand and seal of office.		
Signature of officer admi	nistering oath	Stace 1	1, Rosen officer administering oath	Texas Nota Title of officer adminis	ry Public stering oath

P.O.Box 12070

POLITICAL EXPENDITURES	SCHEDULE F		
The Instruction Guide explains how to complete this form.	1 PAGE # Schedule: 1/1 Report: 3/3		
2 FILER NAME Dietz, John (Hon.)	3 ACCOUNT # (Ethics Commission filers) 00019973		
4 Date 5 Payee name Travis County Democratic Party	7 Amount (\$)		
10/07/2008 6 Payee address; City; State; Zip Code P.O. Box 684263 Austin, TX 78768-4263	\$4,100.00		
8 Purpose of payment (See instructions regarding type of information required.) proportionate share of overhead expenses, TEC253.1611(e)(2)  (If travel outside of Texas, complete Schedule T)  Office sought: Office held:	ct expenditure to benefit Candidate/Officeholder ••• older name:		